DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

is a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, and I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a United States Patent is sought on the invention entitled:

AUTOMATED BIOLOGICAL REACTION APPARATUS

he specification of which:			
is attached hereto	•		•
XX was filed on March 2, 1990] as Attorney Docket Number	er <u>193.00</u> 16 - \	
was filed on	, as Application Serial Numb	ber	
was amended on Thereby state that I have reviewed	:	of the above-identified specifi	cation, including the claims,
is amended by any amendment referre		•	
I acknowledge my duty to disclose		to the examination of this app	olication in accordance with
Title 37, Code of Federal Regulations,			
Thereby claim the benefit under T	` *	119 of the foreign application	u(s) for patent or inventor's
certificate indicated below and have also			•
same subject matter having a filing date	•	••	
, ,		•	
<u>Country</u> None.	<u>Number</u>	Filing Date	Priority Claimed Yes No Yes No Yes No
	Page 1 of 5	j	·

LAW OFFICES OF
WILLIAM B. WALKER
PROFESSIONAL CORPORATION
2011 THE ALLMEDA, SUITE 110
SAN LOSE CA 2012

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner required by the first paragraph of Title 35, United States Code §112, I acknowledge my duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application and the national or Patent Cooperation Treaty international filing date of this application.

Application Serial Number 07/488,601	Filing Date March 2, 1990	Status (pending abandoned, patented) Pending.

I hereby appoint the following:

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WILLIAM B. WALKER, Reg. No. 22,498 LAURA TERLIZZI, Reg. No. 31,307

respectively and individually, as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Please address all communications to Laura Terlizzi, whose address and telephone number is:

WILLIAM B. WALKER
Professional Corporation
2021 The Alameda, Suite 110
San Jose, California 95126
U.S.A

(408) 249-7750

Page 2 of 5

	r	Partito Manager		
	Full Name	Family Name	First Given Name	Second Given Name
	of Inventor	Copeland /-10	Keith '	G.
2	Residence &	City	State or Foreign Country	Country of Citizenship
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	Full Name		First Given Name "	Second Given Name
	of Inventor	Grogan 2-6t	Thomas	M.
ا ۽ ا		City		
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ja il	~ 11 > -	Family Name	First Given Name	Second Given Name
200	Full Name	Hassen 2 0	G1- 3	Second Over Rame
22	of Inventor	nassen 3	Charles	
2 0 3	Dasida-aa 6	City	State or Foreign Country	Country of Citizenship
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3	Chizenship		ALIZONA	U.S.A.
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			- 445411	AZ 85719/U.S.A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 201	Signature of Inventor 202	Signature of Inventor 203
Methal conclored	Thomas M. Shogan	MIST
Date	Date	Date State
3/19/91	1 Ami 1991	7/19/01
IMPORTANT: Refore this declar	ention is signed the act of the	

Before this declaration is signed, the patent application (the specification, the claims and this declaraction) must be read and understood by each person signing it, and no changes may be made in the application after this declaraction has been signed.

Page 3 of 5

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	Full Name	Family Name	First Given Name	Second, Given Name
of Inventor	Humphreys 4-00	William	Ross	
2	Residence &	City	State or Foreign Country	Country of Citizenship
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	Full Name	Family Name	First Given Name	Second Given Name
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-1	Full Name	Family Name	First Given Name	Second Given Name
	of Inventor	Miller 6-CE	Phillip .	C.
2	Residence &	City	State or Foreign Country	Country of Citizenship
206	6 Citizenship	Tucson HZ	Arizona	U.S.A.
	Post Office	Post Office Address	City	State & ZIP Code/Country
ff.	Address	8392 Hillwood Ln.	Tucson	-AZ 85715/U.S.A.

Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 204			
Signature of inventor 204	Signature of Inventor 205	//	Signature of Inventor 206
Will IN	(hols D	ferme	The Chilly
Date	Date	- fe	21140 (1/11/11/11
Mar h 20, 1991	March 1	9 1911	March 17 1991
IMPORTANT: Before this declar	ration is signed, the	patent application	

Before this declaration is signed, the patent application (the specification, the claims and this declaraction) must be read and understood by each person signing it, and no changes may be made in the application after this declaraction has been signed.

-Lover->

	I	Family Name	First Given Name	10
	Full Name of Inventor	Richards 7-0	William	Second Given Name L.
2 0 7	Residence & Citizenship	Tucson · A	State or Foreign Country Arizona	Country of Citizenship U.S.A.
	Post Office Address	Post Office Address 100 E. Strada Patania	Cay Tucson	State & ZIP Code/Country AZ 85737/U.S.A.
	Full Name of Inventor	Showalter 8.00	First Given Name Wayne	Second Given Name A.
2 0 8	Residence & Citizenship	Tucson A	State or Foreign Country Arizona	Country of Citizenship U.S.A.
Ŭ	Post Office Address	Post Office Address 2260 N. Shannon Rd.	Tucson	State & ZIP Code/Country AZ 85745/U.S.A.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Full Name of Inventor	Family Name	First Given Name	Second Given Name
2 0 9	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & ZIP Code/Country

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 208	Signature of Inventor 209
Mayo A. Stoward	ن <u>م</u> ا
way in Zine	
Date / / / / / / / / / / / / / / / / / / /	Date
March 11, 1791	
	Wayne A. Showed

IMPORTANT:

Before this declaration is signed, the patent application (the specification, the claims and this declaraction) must be read and understood by each person signing it, and no changes may be made in the application after this declaraction has been signed.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE (Case No. 97,008-R)

In re Application of:)	
Copeland, et al.)	
Serial No.: 08/906,678)	Group Art Unit: 1313
Filed: August 5, 1997))	Examiner: To Be Assigned
For: Automated Tissue Slide Processing Apparatus With Fluid Injector)	
Asst. Commissioner for Patents		

<u>POWER OF ATTORNEY BY ASSIGNEE OF ENTIRE INTEREST</u> (REVOCATION OF PRIOR POWERS)

As assignee of record of the entire interest of the above identified

application patent

REVOCATION OF PRIOR POWERS OF ATTORNEY

all powers of attorney previously given are hereby revoked and

NEW POWER OF ATTORNEY

The undersigned hereby appoints the following:

Denis A. Berntsen John J. McDonnell Daniel A. Boehnen Bradley J. Hulbert Paul H. Berghoff Grantland G. Drutchas Steven J. Sarussi David M. Frischkorn James C. Gumina A. Blair Hughes Thomas A. Fairhall Emily Miao Kevin E. Noonan Leif R. Sigmond, Jr. Lawrence H. Aaronson	Reg. No. 26707 Reg. No. 26949 Reg. No. 28399 Reg. No. 30130 Reg. No. 30243 Reg. No. 32565 Reg. No. 32784 Reg. No. 32833 Reg. No. 32898 Reg. No. 32898 Reg. No. 32901 Reg. No. 34591 Reg. No. 35285 Reg. No. 35303 Reg. No. 35680 Reg. No. 35818	Matthew J. Sampson Curt J. Whitenack Christopher M. Cavan Michael S. Greenfield Mark Chao Roger P. Zimmerman Anthoula Pomrening (agent) George I. Lee Patrick G. Gattari Audrey L. Bartnicki Amir N. Penn Patrick J. Halloran (agent) Thomas E. Wetterman Robert J. Irvine David S. Harper G. Kenneth Smith	Reg. No. 35999 Reg. No. 36054 Reg. No. 36475 Reg. No. 37142 Reg. No. 37293 Reg. No. 38670 Reg. No. 38805 Reg. No. 39269 Reg. No. 39682 Reg. No. 40499 Reg. No. 40767 Reg. No. 41053 Reg. No. P41523 Reg. No. P41865 Reg. No. P42636 Reg. No. P42335
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the mailing address and telephone number of each of whom is McDonnell Boehnen Hulbert & Berghoff, 300 South Wacker Drive, Suite 3200, Chicago, Illinois 60606, and (312) 913-0001, with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Please direct all correspondence to Paul H. Berghoff.

<u>EVIDENCE A</u>	AND CERTIFIC	ATION OF	CHAIN (OF TITLE
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Recorded in PTO on August 31, 1992 at Reel/Frame 6557/022-028
Recorded herewith.

ASSIGNEE CERTIFICATION

In accordance with 37 C.F.R. § 3.73 the assignee hereby certifies that the evidentiary documents with respect to its ownership have been reviewed and that, to the best of assignee's knowledge and belief, title is in the assignee seeking to take this action.

Signature

Name: Brian McGraw

Title: VP Engineering

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